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PTO/SB/05 (01-04) Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

| Attorney Docket No. | |
|------------------------|---------------------------|
| First Inventor | Filza Potapova |
| Title | attachable sitting device |
| Express Mail Label No. | |

| APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents. | Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450 |
|---|--|
| 1. | 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies |
| - Claim(s) | ACCOMPANYING APPLICATION PARTS |
| - Abstract of the Disclosure 4. | 9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations 13. Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other: Doly the requisite information below and in the first sentence of the CFR 1.76: tion-in-part (CIP) of prior application No: Art Unit: |
| For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the | prior application, from which an oath or declaration is supplied under Box |
| 5b, is considered a part of the disclosure of the accompanying continuation The incorporation can only be relied upon when a portion has been inadver | or divisional application and is hereby incorporated by reference. |
| 19. CORRESPONI | |
| Customer Number: | OR Correspondence address below |
| Name | |
| Address | |
| Address | |
| City | State Zip Code |
| Country | elephone Fax |
| Name (Print/Type) Fi/za Pota pova | Registration No. (Attorney/Agent) |

This collection of information is required by 37 CFR 1.5369. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (10-03)
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| CEE TO A NOMITT | Complete if Known |
|--|-------------------------------------|
| FEE TRANSMITT | Application Number |
| for FY 2004 | Filing Date |
| Effective 10101/2003. Patent fees are subject to annual re | First Named Inventor Filza Potapoud |
| | Examiner Name |
| Applicant claims small entity status. See 37 CFR 1. | Art Unit |
| OTAL AMOUNT OF PAYMENT (\$) 383 | Attemory Decket No. |

| Attorney bocket No. | | | | | | | | |
|--|------------------------------------|--------------------|-----------------------------|----------|-------------|--|--------------------|--|
| METHOD OF PAYMENT (check all that apply) | | | FEE CALCULATION (continued) | | | | | |
| Check Credit card Money Other None | | 3. ADDITIONAL FEES | | | | | | |
| Deposit Account: | | Large ! | Entity | Small | Entity | | | |
| Deposit Account: | | Fee Code | Fee (\$) | | Fee (\$) | Fee Description | Fee Paid_ | |
| Account | | 1051 | 130 | 2051 | • • | Surcharge - late filing fee or oath | ree Falu | |
| Number Deposit | | 1052 | 50 | 2052 | | Surcharge - late provisional filing fee or | | |
| Account | | | | ŀ | | cover sheet | | |
| Name The Director is authorized to: (check all that apply) | | 1053 | 130 | 1053 | | Non-English specification | | |
| Charge fee(s) indicated below Credit any overpayments | | | 2,520 | 1812 | -, | For filing a request for ex parte reexamination | | |
| Charge any additional fee(s) or any underpayment of fee(s) | | 1804 | 920* | 1804 | 920* | Requesting publication of SIR prior to Examiner action | | |
| Charge fee(s) indicated below, except for the filing fee | | 1805 | 1,840* | 1805 | 1,840* | Requesting publication of SIR after | 1 | |
| to the above-identified deposit account. | | | | | | Examiner action | | |
| FEE CALCULATION | N | 1251 | 110 | 2251 | 55 | Extension for reply within first month | | |
| 1. BASIC FILING FEE | • • | 1252 | 420 | 2252 | 210 | Extension for reply within second month | | |
| Large Entity Small Entity | Fee Paid | 1253 | 950 | 2253 | | Extension for reply within third month | | |
| Fee Fee Fee Fee Description Code (\$) Code (\$) | ı ree raiu | 1254 | 1,480 | 2254 | 740 | Extension for reply within fourth month | \vdash | |
| 1001 770 2001 385 Utility filing fee | 385 | 1255 | 2,010 | 2255 | 1,005 | Extension for reply within fifth month | | |
| 1002 340 2002 170 Design filing fo | | 1401 | 330 | 2401 | 165 | Notice of Appeal | | |
| 1003 530 2003 265 Plant filing fee | | 1402 | 330 | 2402 | 165 | Filing a brief in support of an appeal | <u> </u> | |
| 1004 770 2004 385 Reissue filing | fee | 1403 | 290 | 2403 | 145 | Request for oral hearing | <u> </u> | |
| 1005 160 2005 80 Provisional fili | ng fee | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding | igsquare | |
| SUBTOTAL (1) | (\$) | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable | | |
| | | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional | \perp | |
| 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE | | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) | \sqcup | |
| Extra Claims | below Fee Paid | 1502 | 480 | 2502 | 240 | Design issue fee | | |
| Total Claims20** = X | | 1503 | 640 | 2503 | 320 | Plant issue fee | | |
| Claims - 3" = - X | | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner | | |
| Multiple Dependent | | 1807 | 50 | 1807 | 7 50 | Processing fee under 37 CFR 1.17(q) | | |
| Large Entity Small Entity Fee Fee Fee Fee Fee Descr | intian | 1806 | 180 | 1806 | | Submission of Information Disclosure Stmt | | |
| Code (\$) Code (\$) | | 8021 | 40 | 8021 | i 40 | Recording each patent assignment per property (times number of properties) | | |
| 1202 18 2202 9 Claims in exc 1201 86 2201 43 Independent | ess of 20 claims in excess of 3 | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) | | |
| | ndent claim, if not paid | 1810 | 770 | 2810 | 385 | For each additional invention to be | | |
| 1204 86 2204 43 ** Reissue in over origina | dependent claims al patent | 1801 | 770 | 2801 | 385 | examined (37 CFR 1.129(b)) Request for Continued Examination (RCE) | | |
| 1205 18 2205 9 ** Reissue cl | aims in excess of 20 iginal patent | 1802 | 900 | 1802 | 900 | • | | |
| CURTOTAL (2) | (\$) | Other | fee (sp | ecify) _ | | | | |
| SUBTOTAL (2) (\$) **or number previously paid, if greater; For Reissues, see above | | *Redu | ced by | Basic 1 | Filing F | ee Paid SUBTOTAL (3) (\$) | | |

| SUBMITTED BY | | | | (Complete (| (Complete (if applicable)) | | |
|-------------------|-------|----------|--------------------------------------|-------------|----------------------------|--|--|
| Name (Print/Type) | Filza | Potapora | Registration No. (Attorney/Agent) | Telephone | 6105245592 | | |
| Signature | Film | Par | | Date | 16 - Apr - 200 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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16-Apr-04

3105 Trinity Court

Chester Springs, PA 19425

W: 484 344 4694

H: 610 524 5592

C: 484 888 5195

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir/Madam:

Enclosed please find my patent application for the attachable sitting device buttsy and the specifications, which I have completed to my best ability.

Please review my claims. I will appreciate very much if you adjust them to my advantage.

Please contact me at the above address and phone numbers if you have any questions.

Sincerely,

Filza Potapova